Dat	e: 30. september 2022		
You	ır name: Magdalena Foss	sum	
Ma	Manuscript title: Børneurologi		
Ma	nuscript number (if known):	
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	m #1 below, report all sup r items, the time frame for		d in this manuscript without time limit. For all months.
		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
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3	Royalties or licenses	⊠ None	
			parties and many morning polyments.

4	Consulting fees	⊠ None	
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5	Payment or honoraria for	⊠ None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert testimony	EZ N	
В		⊠ None	
	testimony		
7	Support for attending	⊠ None	
	meetings and/or travel	All the second s	
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8	Patents planned, issued or	⊠ None	
	pending		
9	Participation on a Data Safety Monitoring Board or Advisory Board	⊠ None	
		million and their are proved and the second of the second	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or	⊠ None	
	unpaid		
11	Stock or stock options	⊠ None	
		23 None	
12	Receipt of equipment,	⊠ None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
12	Other financial as ass	57 N	
13	Other financial or non- financial interests	⊠ None	

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Date	e: 30. september 2022		
You	r name: Jorgen Thorup		
Mar	nuscript title: Børne	urologi	
Mar	nuscript number (if knowr	1):	
are re third comr list a The f	elated to the content of your parties whose interests maitment to transparency a relationship/activity/inter	our manuscript. "Related" ay be affected by the con- nd does not necessarily in est, it is preferable that yo	relationships/activities/interests listed below that means any relation with for-profit or not-for-profit tent of the manuscript. Disclosure represents a dicate a bias. If you are in doubt about whether to bu do so. ps/activities/interests as they relate to the current
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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	⊠ None	
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Time	e frame: past 36 months		
2	Grants or contracts from any entity (if not indicated in item #1 above).	Novo Nordic Grant	
3	Royalties or licenses	☐ None Gyldendal	

4	Consulting fees	⊠ None
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	⊠ None
6	Payment for expert testimony	⊠ None
7	Support for attending meetings and/or travel	None None
8	Patents planned, issued or pending	⊠ None
9	Participation on a Data Safety Monitoring Board or Advisory Board	European Reference Network Urogen European Komission
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	Clinical Academic Group
11	Stock or stock options	⊠ None
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	⊠ None
13	Other financial or non- financial interests	⊠ None

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30 september 2022

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You	Ir name: Gitte Hvistenda	hi	
Ma	nuscript title: Børner	ırologi	
Ma	nuscript number (if known):	
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2	Grants or contracts from any entity (if not indicated in item #1 above).	⊠ None	
3	Royalties or licenses	⊠ None	

4	Consulting fees	⊠ None	
5	Payment or honoraria for lectures, presentations, speakers bureaus,	⊠ None	
	manuscript writing or educational events		
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6	6 Payment for expert testimony	⊠ None	
7	Support for attending	⊠ None	
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8	Patents planned, issued or	⊠ None	
	pending		
9	Participation on a Data Safety Monitoring Board	⊠ None	
	or Advisory Board		
10	Leadership or fiduciary	⊠ None	
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2	Grants or contracts from any entity (if not indicated in item #1 above).	⊠ None	
3	Royalties or licenses	⊠ None	
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4	Consulting fees	⊠ None
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	⊠ None
6	Payment for expert testimony	⊠ None
7	Support for attending meetings and/or travel	⊠ None
8	Patents planned, issued or pending	⊠ None
9	Participation on a Data Safety Monitoring Board or Advisory Board	⊠ None
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None
11	Stock or stock options	⊠ None
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	⊠ None
13	Other financial or non- financial interests	⊠ None

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